

will move to proceed to S. 1232 before the end of the year.

Sincerely,

HARRY REID,
Majority Leader.

Mr. MCCAIN. Mr. President, I wish to say again that we have been told time after time that this legislation would come before the Senate. It has not. I do not know what process the majority leader will use—reconciliation, fill up the tree, vote on cloture, make this amendment nongermane. I have no confidence. If I had the confidence that this amendment would be taken up in a regular order fashion and that the full Senate would vote on it on the health reform bill, I would have some confidence we could get it done. In the absence of that, I will seek a vote on this amendment.

If there is a budget point of order on this amendment, let no one be fooled: It is not because they do not want to violate the budget rules of the Senate, because they violated them in every possible way in previous appropriations bills, to the tune of billions of dollars.

I yield the floor.

Mr. DORGAN. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. DORGAN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DORGAN. Mr. President, let me spend a few moments talking about this issue of reimportation of prescription drugs and the history of it and the work many of us have done together, a large group of Members of the Senate, including Senator MCCAIN, working on this issue.

Senator MCCAIN has offered an amendment, No. 2629, which he has just finished discussing. As I understand the amendment, it would prohibit the use of funds appropriated under the act for preventing individuals, wholesalers, or pharmacists from importing certain prescription drugs. That is in the title. It does have, as I think Senator MCCAIN suggested, perhaps a point of order against it. I do not know whether it is because it would be legislating on an appropriations bill. In any event, whatever the circumstances with this amendment, I was a bit surprised to see this amendment on this bill, but everybody has a right to offer amendments.

Let me say that Senator MCCAIN is a part of a group of us who have worked together. We have worked on a piece of legislation called the Dorgan-Snowe legislation. Senator SNOWE, as the major cosponsor, and many others, including Senator MCCAIN as a cosponsor, have worked on this issue for a long time. The fact is, the appropriate place to address this, in my judgment, is in the health care bill that is going to come to the floor in the next couple of weeks. I have said previously that I

fully intend to offer this bipartisan bill as an amendment. We have over 30 cosponsors in the Senate, Republicans and Democrats. It ranges from the late Senator Ted Kennedy, to JOHN MCCAIN and a wide range of Senators on both sides of the political aisle. That has been the support for legislation that I think addresses a very important issue.

Let me describe the issue, if I might. I have in my desk in the Senate two bottles that contain medicine. Actually, these are empty bottles. This is Lipitor. The medicine that would be contained in these bottles is made in Ireland by a company that produces Lipitor. It is the most popular cholesterol-lowering drug in America by far. It is made in Ireland, in a plant that is inspected by the FDA, and the medicine is then sent all around the world. These two bottles, as you can see, are identical. These two bottles contained identical tablets, 20 milligrams of Lipitor made in the same place, so it is the same manufacturing, the same pill, put in the same bottle, made by the same company. The difference? One is shipped to Canada, one is shipped to the United States. Difference? Price. Here is the one that was shipped to Canada; this is \$1.83 per tablet. This was sent to the United States, \$4.48 per tablet. The only difference is price. Why is that the case? Because the American people are charged the highest prices for brand-name prescription drugs in the world, the highest prices in the world for brand-name drugs. In this case, we paid \$4.48 per tablet; someone else paid \$1.83. It doesn't matter whether it is Canada. It could be England, Italy, France, Germany, Spain—we pay the highest prices in the world, and it is unfair.

The question is not, Is there a problem? Of course there is a problem. We have a whole lot of folks in this country who cannot figure out how they are going to afford to pay for their groceries and their medicine, so they go get their medicine first at the pharmacy in the grocery store and figure out how much they can eat later. Of course this is a problem.

I have described the guy who sat on a straw bale once at a farm a while back, 80 years old, who told me in a little meeting we had in a farmyard: My wife has fought breast cancer for 3 years. She is in her seventies. And we have spent all of those 3 years driving to Canada to try to buy Tamoxifen where it is sold for 80 percent less—an 80 percent lower price in Canada for the identical prescription drug. So my wife and I are trying to drive up and get Tamoxifen in Canada.

The reason they can do that is, apparently at the border, a small amount of personal use, up to 30 days or 60 or 90 days personal use of prescription drugs will be allowed to be brought over without a hassle.

But the question is what about the rest of the American people who cannot drive to the border or go to another country and access the same prescrip-

tion drugs, same pill put in the same bottle by the same company who decided to charge the American people the highest prices in the world? What about those people?

My point is this: We are going to have a big health care bill on the floor of the Senate sometime in the next few weeks. Oh, it has been through this committee and that committee. It has been on a long, tortured trail. Lord knows every single day in the press we read the next little news item about who said what about this.

One way or another we are going to have some kind of health care reform on the floor of the Senate. Will it pass? Will it be omnibus? Will it be comprehensive? I do not know any of those things. I do know this: that the Gang of 6 and the gang in the Finance Committee or the gang in the HELP Committee are going to become a Gang of 100 or 100 gangs of 1 when it gets to the floor of the Senate. Everybody is going to have their amendments because most Members of the Senate have not had an opportunity to weigh in on health care at this point with their own views and their own amendments. They are not on the committee, not part of a small gang. Let me say, on behalf of myself and I think Senator SNOWE, it is the Snowe-Dorgan legislation with respect to prescription drug reimportation, which includes Senator MCCAIN as a cosponsor, that when health care comes to the floor of this Senate, you can count on it, that there is going to be an amendment and there is going to be a vote on the issue of the prices of prescription drugs.

Perhaps there are some people who do not want it. I understand they do not want to have a vote on it. But in my judgment, there cannot be credible efforts to address health care if you do not address the issue of health care costs, the relentless rising cost of health care.

Part of that, not an insignificant part, relates to the question of the relentless runup of prescription drug costs every single year. Take a look at the increased prices for prescription drugs every year and then think about the people out there who are trying to figure out: How do I pay for this?

I understand senior citizens have the opportunity, under Part D of Medicare, to have some drug coverage. I understand there is a problem with that, there is what is called a doughnut hole in the Washington lexicon. I also understand that someone made a deal with the pharmaceutical industry for \$80 billion over 10 years, which is a relatively small part of their gross revenues, in order to fill part of the doughnut hole with 50 percent off on brand-name drugs.

I understand all that. I was not a part of it, nor was anybody I know of in this Chamber. The question is, What about all the rest of the American people and the fact that they are now charged the highest prices in the world for brand-name prescription drugs? Is it fair? I say no.